

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

<b>Application Number</b>	09/502,133-Conf. #4787
<b>Filing Date</b>	February 11, 2000
<b>First Named Inventor</b>	Harold E. HELSON
<b>Title</b>	ENHANCING STRUCTURE DIAGRAM GENERATION
<b>Art Unit</b>	2128
<b>Examiner Name</b>	H. M. Jones
<b>Attorney Docket No.</b>	0103544.00131US2

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number: 23483

OR

Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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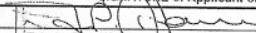
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature: 

Date: July 29, 2008

Name: Edwin P. Tiffany

Telephone: 617-588-9150

Title and Company: VP Administration & Treasurer CambridgeSoft Corporation

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



\*Total of 1 forms are submitted.